

As the COVID-19 pandemic surged and the economy declined, the Medicaid program enrolled 29,742 new members between March 30, 2020, and June 30, 2020. A total of 860,744 New Mexicans were enrolled in Medicaid as of July 1, 2020.

On March 18, 2020, the federal Families First Coronavirus Response Act (FFCRA) was signed into law. The FFCRA included a 6.2 percentage point increase in the regular Medicaid matching rate in response to the COVID-19 pandemic. States who received the 6.2 percentage point increase were required to continue Medicaid eligibility for any individuals who were enrolled as of March 18, 2020, or became enrolled during the public health emergency, unless the individual voluntarily terminated eligibility or was no longer a resident of the state. On July 23, 2020, the U.S. Department of Health and Human Services declared the national public health emergency be extended through the end of calendar year 2020.

The Human Services Department (HSD) jointed the Department of Health and other agencies in managing the state’s response to the COVID-19 public health emergency. HSD will continue working with its federal partners to obtain additional authority and regulatory waivers that will enable further flexibility while emergency conditions persist with the goal of keeping clients covered through the termination of the COVID-19 emergency declaration.

HSD developed an improvement action plan to ensure that every qualifying New Mexican receives timely and accurate benefits. HSD added performance measures to Centennial Care 2.0 Medicaid managed care organizations’ (MCO) contracts. MCOs’ performance outcomes can result in annual monetary penalties should the MCO fail to meet the established HSD target. Blue Cross Blue Shield of New Mexico and Western Sky Community Care have also included quality metrics in their value-based purchasing agreements with providers. Each MCO continues to work on improving performance by conducting member service reminder calls, distributing informational newsletters, and providing scheduling assistance with members.

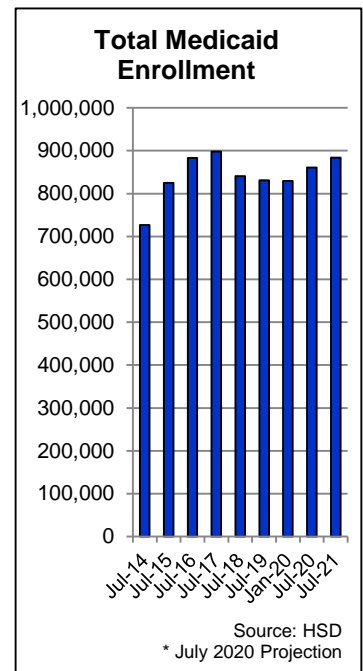
Medical Assistance Division

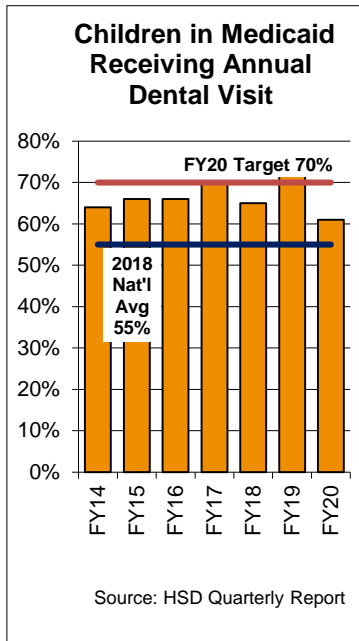
In response to COVID-19, HSD allowed its healthcare providers to offer telehealth services for physical health, behavioral health, and long-term care settings to ensure safe access to healthcare. HSD added new evaluation and management (E&M) telehealth codes and implemented payment rates equivalent to office visits in an effort to encourage the use of telephonic visits and e-visits in lieu of in-person care to reduce the risk of spreading COVID-19.

HSD’s policy is that raising Medicaid payment rates strengthens partnerships with providers who deliver care and services to the most vulnerable New Mexicans, and fortifies and protects the healthcare delivery network. HSD implemented provider rate increases in FY20 for outpatient settings, dispensing fees to community-based pharmacies, long-term services and supports providers, and supportive housing benefits for people with serious mental illness. There also were increases in payment rates to governmental and investor-owned hospitals, and hospitals serving a high share of Native American members. HSD also implemented a minimum wage adjustment for personal care services providers for statewide and regional changes

ACTION PLAN

Submitted by agency?	Yes
Timeline assigned?	Yes
Responsibility assigned?	Yes





The Medicaid caseload in June was 860,744 individuals, a 4.4 percent increase from one year ago. The count of Medicaid recipients increased by 7,493, 0.9 percent, since May.

The annual number of children on Medicaid increased by 10,773 children – in June 2019 Medicaid served 355,059 children and in June 2020 Medicaid served 365,832 children.

The Supplemental Nutrition Assistance Program (SNAP) caseload in June 2020 was 249,365, a 12.8 percent increase from one year ago, and an increase of 1,691 cases from May, or a 0.7 percent increase.

The Temporary Assistance for Needy Families (TANF) caseload was 12,036 in June, an increase of 19.9 percent from June 2019, and an increase of 100 cases or 0.8 percent from May 2020.

in minimum wage. Further, HSD implemented increased payments for evaluation and management codes to a minimum of 90 percent of the 2019 Medicare fee schedule, effective July 1, 2019.

HSD suspended in-home supervisory visit requirements for all in-home care services. However, MCOs are required to coordinate with home care providers to ensure continued in-person services for those who need them while using telephone visits to the extent possible. MCOs have also been directed to obtain, review, and ensure implementation of personal care services (PCS), respite, support broker, and home health aide service agency’s emergency disaster plans. The agency disaster plans must include actions for in-person visits with members who have a confirmed diagnosis of COVID-19 and back-up plans for providing care when the member’s caregiver has been diagnosed with COVID-19.

Budget: \$5,676,802.9 **FTE:** 183

	FY18 Actual	FY19 Actual	FY20 Target	FY20 Actual	Rating
Infants in Medicaid managed care who had six or more well-child visits with a primary care physician during their first 15 months*	44.5%	46.1%	N/A	46.1%	Y
Children and youth in Medicaid managed care who had one or more well-child visits with a primary care physician during the measurement year*	71.8%	75.1%	88%	73.2%	R
Children ages 2 to 21 enrolled in Medicaid managed care who had at least one dental visit during the measurement year	67%	68%	70%	61%	R
Individuals in managed care with persistent asthma appropriately prescribed medication	60%	66%	50%	No Report	R
Hospital readmissions for children ages 2 to 17 within 30 days of discharge	5.6%	4.5%	<6%	5.3%	G
Hospital readmissions for adults 18 and over within 30 days of discharge	7.2%	7.4%	<10%	7.5%	G
Emergency room use categorized as non-emergent per one thousand Medicaid member months ²	60%	60%	0.45	59%	G
Individuals with diabetes in Medicaid managed care ages 18 through 75 whose hospital admissions had short-term complications	16.7	24.6	16.4	16.7	Y
Newborns with Medicaid whose mothers received a prenatal care visit in the first trimester or within 42 days of enrollment in the managed care organization*	77%	82%	83%	No Report	R
Medicaid managed care members with a nursing facility level of care being served in the community	87%	86%	75%	86%	G

Program Rating R Y G

¹ HSD uses a rolling average; the most recent unaudited data available includes the last quarters of FY19 and the first quarters of FY20. The data for HEDIS measures is preliminary.

² The target was a per capita target whereas the data is per 1,000 members. HSD previously reported it would use a consistent methodology in the future.

*Measures are Healthcare Effectiveness Data and Information Set (HEDIS) measures which represent a tool used by more than 90 percent of America’s health plans to measure performance on important dimensions of care and service.

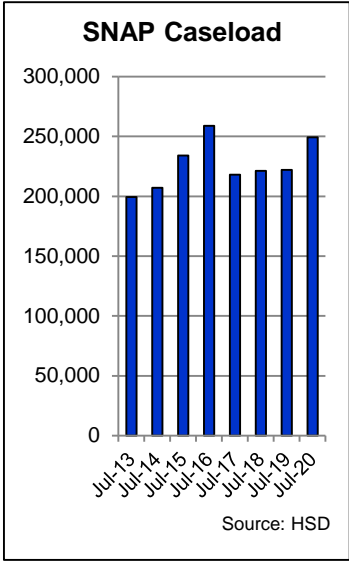
Income Support Division

The Income Support Division (ISD) added performance goals to the New Mexico Works (NMW) service provider’s contract to improve employment outcomes; however, the percent of clients obtaining a job has not been greatly affected by these efforts. The NMW service provider delivers case management through coaching and mentoring to encourage online enrollment into education programs, specifically high school equivalency, identifies businesses willing to hire clients, and assists with job readiness.

ISD reports it exceeded the target for TANF federal works requirements as prescribed by the federal Administration for Children and Families (ACF). ACF permits states to use their excess maintenance of effort funds to reduce the required federal work participation rates referred to as the regressed work participation rate. ACF reduced New Mexico’s federal work participation two-parent rate from 90 percent to 22.9 percent. This reduction allows ISD to prioritize case management including increased coaching and mentoring for participants and their families, promoting family stabilization, and removing barriers to employment.

Budget: \$959,738.5 **FTE:** 1,149

	FY18 Actual	FY19 Actual	FY20 Target	FY20 Actual	Rating
Regular supplemental nutrition assistance program cases meeting the federally required measure of timeliness of 30 days	99.1%	99.1%	98%	98.8%	G
Expedited supplemental nutrition assistance program cases meeting federally required measure of timeliness of 7 days	98.1%	99%	98%	98.8%	G
Temporary assistance for needy families clients who obtain a job during the fiscal year	54.6%	48.5%	52%	No Report	R
Children eligible for supplemental nutritional assistance program participating in the program with family incomes at or below 130 percent of poverty level	No Report	88.5%	94%	No Report	R
Two-parent recipients of temporary assistance for needy families meeting federally required work requirements	59.5%	39.5%	62%	43%	R
All families recipients receiving temporary assistance for needy families meeting federally required work requirements	48.9%	31.1%	53%	35%	R
Program Rating	Y	Y			R



Due to the declaration of a public health emergency due to COVID-19, ISD lifted all New Mexico Works (NMW) sanctions related to work participation and restored participants’ benefits to their full benefits.

In addition to ensuring all newly approved TANF recipients received the proper orientation and assessments to identify and locate additional resources to support vulnerable families during this time, the NMW service provider, Career Works Solutions, is actively re-engaging all previously sanctioned participants.

This re-engagement effort ensures participants have access to the supports they need in their communities and remain engaged with NMW to avoid sanctions in the future.

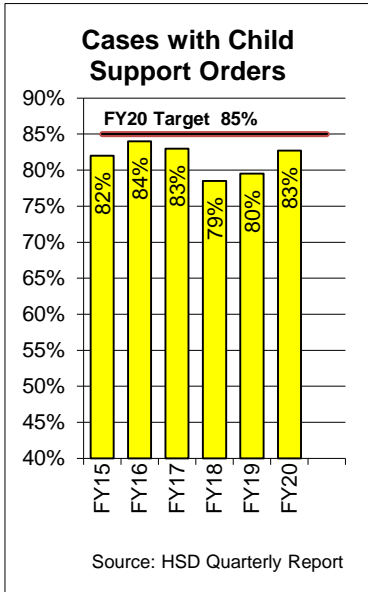
Child Support Enforcement Division

The Child Support Enforcement Division (CSED) reported it filled all of its budgeted positions and reduced caseworker attrition from over 35 percent in previous years to under 25 percent in FY19.

CSED reports it is successfully piloting modernization initiatives to improve performance and increase staff retention, and the Rio Rancho pilot resulted in a 5.2 percent increase in collections and a 4.9 percent increase in the percent of arrears collected.

Due to COVID-19, CSED escalated implementation of its child support prioritization tool to assist with managing for performance. CSED also worked on having parties agree to an establishment order, when possible, to avoid reliance on court hearings which could delay establishing court orders during the COVID-19 public health emergency.

CSED reported its child support collections for FY20 were up from about \$138 million to \$156 million due to intercepting federal CARES Act stimulus funds checks that went out to non-custodial parents (NCPs). CSED encouraged NCPs to use electronic means to make payments, including mailing payments, rather than dropping off payments at the local offices due to the social distancing order. However, CSED kept daily limited office hours to allow NCP payments to continue to flow to the custodial parents during the pandemic. In addition, NCPs who apply for unemployment insurance will be automatically linked with the child support system, and a portion of their unemployment benefit will pay for their child support obligation.



Budget: \$31,871.1 **FTE:** 378

	FY18 Actual	FY19 Actual	FY20 Target	FY20 Actual	Rating
Support arrears due that are collected	62.1%	60.7%	67%	66.2%	Y
Total child support enforcement collections, in millions	\$139.8	\$137.5	\$140.5	\$156	G
Child support owed that is collected	57.8%	57.7%	62%	58.7%	R
Cases with support orders	78.5%	79.5%	85%	83.2%	Y
Program Rating	R	R			Y

Note: Children with paternity acknowledged or adjudicated are reported in the federal fiscal year.